

LENAWEE-LIVINGSTON-MONROE-WASHTENAW
OVERSIGHT POLICY BOARD

VISION

"We envision that our communities have both an awareness of the impact of substance abuse and use, and the ability to embrace wellness, recovery and strive for a greater quality of life."

AGENDA

May 23, 2019

705 N. Zeeb Road, Ann Arbor

Patrick Barrie Conference Room

9:30 a.m. – 11:30 a.m.

1. ***Introductions & Welcome Board Members***– 5 minutes
2. Approval of Agenda (Board Action) – 2 minutes
3. Approval of April 25, 2019 OPB Minutes {Att. #1} (Board Action) – 5 minutes
4. Audience Participation – 3 minutes per person
5. Old Business – 15 minutes
 - a. Finance Report {Att. #2} – 15 minutes
6. New Business – 35 minutes
 - a. Prevention RFQ and updates {Att. #3}
 - b. Mini Grant Request {#4} and Running Total {Att. #4a}
 - c. GAIN incentive reimbursement proposal {Att. #5}
 - d. Billing Form from Region 5 for GAIN reimbursement {Att. #5a}
7. Report from Regional Board (Discussion) – 15 minutes
8. SUD Director Updates (Discussion) – 10 minutes
 - a. SOR supplemental grant approved – Total of \$588,240

Next meeting: June 27, 2019

Parking Lot:

**LENAWEE-LIVINGSTON-MONROE-WASHTENAW
OVERSIGHT POLICY BOARD
April 25, 2019 meeting
705 N. Zeeb Road
Ann Arbor, MI 48103**

Members Present: Mark Cochran, Kim Comerzan, William Green, John Lapham, Dianne McCormick, David Oblak, Dave O'Dell, Tom Waldecker

Members Absent: Charles Coleman, Amy Fullerton, Blake LaFuente, Ralph Tillotson, Monique Uzelac

Guests: None

Staff Present: Stephannie Weary, Marci Scalera, Suzanne Stolz, Nicole Adelman, James Colaianne, Amy Johnston, Dana Darrow, Jackie Bradley

D. Oblak called the meeting to order at 9:30 a.m.

1. Introductions
2. Approval of the agenda

**Motion by M. Cochran, supported by K. Comerzan, to approve the agenda
Motion carried**

3. Approval of March 28, 2019 minutes

**Motion by J. Lapham, supported by D. O'Dell, to approve the March 28, 2019 minutes
Motion carried**

4. Audience Participation
) None

5. Old Business

- a. Finance Report

) S. Stolz presented. Discussion followed.

- b. CCAR Training Summary

) The training was very successful.

) The region used new trainers this time, Sara Szczotka and Glynis Anderson from Home of New Vision.

) There is still a tremendous need for more of this training.

) D. Oblak requested that a summary about the training be posted on the CMHPSM web site regarding outcomes of the training, including the possibility/likelihood of employment after receiving training.

) M. Scalera has talked with Glynis Anderson about last month's idea of having a peer event for our region. They are in the early stages of planning.

- c. Updated Mini Grants

) M. Scalera provided an update on mini-grant funding.

6. New Business

a. Introduction of Interim CHMPSM CEO

) J. Colaianne introduced himself to OPB and provided a brief overview of activities at CMHPSM. There should be more information to share after the May regional board meeting.

b. Procurement Process – RFQs

) M. Scaleria provided an overview of the procurement process.

) Rule: no more than \$10K PA2 can be spent without a procurement process, no more than \$25K for Medicaid/federal dollars can be spent without a procurement process.

) The plan is to issue an RFQ for the upcoming fiscal year, and an RFP for FY21.

c. Policy Review

i. Communicable Disease Policy

) Per discussion at March OPB, the policy was updated.

Motion by K. Comerzan, supported by D. McCormick, to approve the Communicable Disease policy
Motion carried

ii. Naloxone Distribution Policy

) The policy was updated with language revisions and updated attachments.

) Law enforcement is supposed to track the expiration dates. All kits are labeled with expiration dates.

) K. Comerzan warned of the potential liability of using naloxone after the expiration date.

Motion by D. McCormick, supported by K. Comerzan, to approve the Naloxone Distribution policy
Motion carried

iii. Fetal Alcohol Disorder Policy

) The policy was updated with resources.

Motion by T. Waldecker, supported by M. Cochran, to approve the Fetal Alcohol Disorder policy
Motion carried

7. Report from Regional Board

) J. Terwilliger resigned. J. Colaianne was named interim CEO.

) Washtenaw County gave CMHPSM notice to vacate the building by Dec. 6, 2019. Staff will continue to bring updates.

8. SUD Director Updates

) The recent submission to state for SOR2 Supplemental can only be used for existing programs. There is approximately \$25k per county to partner with Public Health for a media campaign re: the opiate epidemic. We're waiting for state approval of the submission.

) The STR grant ends April 30, 2019. No cost extension period, continuation year, has been approved by the state, for May 1, 2019 – April 30, 2020. MAT Enhancement funding, Motivational Interviewing, Strengthening Families, Project Assert are all funded from the STR grant.

) The state is running a program called MIREP that involves prison release and mental health/SUD professionals who have an opioid use disorder. The program involves identifying people while they're in jail and following them when they're released. The state has identified Monroe as the county that will receive the funds.

The NODS mandate:

Attachment #1 – May 2019

-) All access staff must be trained to use this gambling addiction screening tool. We currently don't have anything certified gambling addiction specialists.
-) June 26 is the training for access staff.
-) A. Johnson has formed a regional workgroup whose goal is to study gambling addiction from a strategic perspective, using data and trends within the region.

9. Adjourn

Motion by T. Waldecker, supported by M. Cochran, to adjourn the meeting

Motion carried

-) Meeting adjourned at 11:10 a.m.

Community Mental Health Partnership Of Southeast Michigan
SUD SUMMARY OF REVENUE AND EXPENSE BY FUND
 March 2019 FY19

Summary Of Revenue & Expense	Funding Source							Total Funding Sources
	Medicaid	Healthy Michigan	SUD - Block Grant	SUD - SOR	SUD - STR	Gambling Prev	SUD-COBO/PA2	
Revenues								
Funding From MDCH	1,210,118	2,221,416	3,037,949	85,857	266,339	40,327		\$ 6,862,005
PA2/COBO Tax Funding Current Year	-	-	-	-	-	-	930,030	\$ 930,030
PA2/COBO Reserve Utilization	-	-	-	-	-	-	782,216	\$ 782,216
Other	-	-	-	-	-	-	-	\$ -
Total Revenues	<u>\$ 1,210,118</u>	<u>\$ 2,221,416</u>	<u>\$ 3,037,949</u>	<u>\$ 85,857</u>	<u>\$ 266,339</u>	<u>\$ 40,327</u>	<u>\$ 1,712,246</u>	<u>\$ 8,574,250</u>
Expenses								
<u>Funding for County SUD Programs</u>								
CMHPSM				85,857	252,693	38,261		376,811
Lenawee	228,238	440,172	240,651				126,613	1,035,673
Livingston	150,445	277,745	440,882				238,287	1,107,359
Monroe	156,726	328,928	457,130				149,689	1,092,473
Washtenaw	580,766	1,309,198	834,984				515,617	3,240,565
Total SUD Expenses	<u>\$ 1,116,174</u>	<u>\$ 2,356,043</u>	<u>\$ 1,973,646</u>	<u>\$ 85,857</u>	<u>\$ 252,693</u>	<u>\$ 38,261</u>	<u>\$ 1,030,206</u>	<u>\$ 6,852,881</u>
Administrative Cost Allocation	81,362	171,694	170,340		13,645	2,066	-	\$ 439,108
Total Expenses	<u>\$ 1,197,537</u>	<u>\$ 2,527,738</u>	<u>\$ 2,143,986</u>	<u>\$ 85,857</u>	<u>\$ 266,339</u>	<u>\$ 40,327</u>	<u>\$ 1,030,206</u>	<u>\$ 7,291,989</u>
Revenues Over/(Under) Expenses	\$ 12,581	\$ (306,322)	\$ 893,963	\$ -	\$ -	\$ -	\$ 682,039	\$ 1,282,261

<u>Current fiscal year utilization of PA2</u>			Revenues Over/(Under) Expenses
PA2 by County	Revenues	Expenditures	
Lenawee	137,256	126,613	10,644
Livingston	413,392	238,287	175,105
Monroe	302,558	149,689	152,868
Washtenaw	859,039	515,617	343,422
Totals	<u>\$ 1,712,246</u>	<u>\$ 1,030,206</u>	<u>\$ 682,039</u>

Unallocated PA2	<u>FY 19 Beginning Balance</u>	<u>FY19 Projected Utilization</u>	<u>FY20 Projected Utilization</u>	<u>FY20 Projected Ending Balance</u>
Lenawee	924,325	(222,723)	(222,723)	478,878
Livingston	3,039,734	(613,133)	(613,133)	1,813,468
Monroe	522,226	(164,037)	(164,037)	194,152
Washtenaw	2,730,440	(598,506)	(598,506)	1,533,429
Total	<u>\$ 7,216,725</u>	<u>\$ (1,598,399)</u>	<u>\$ (1,598,399)</u>	<u>\$ 4,019,927</u>



Lenawee
Livingston
Monroe
Washtenaw

SUBSTANCE USE DISORDER PREVENTION PROGRAMS

PREVENTION UPDATES - MAY 2019

■ MONROE COUNTY - REQUEST FOR QUOTES

The Community Mental Health Partnership of Southeast Michigan (CMHPSM) is requesting quotes from bidders for sustaining the Monroe County Substance Abuse Coalition (MCSAC) to ultimately reduce substance abuse and the associated consequences in Monroe County. Bidders must demonstrate the implementation of the SAMHSA's **Strategic Prevention Framework (SPF)** for developing coalition plans that lead to community-level change. The SPF is an outcome-based, data-driven, population-level approach to substance abuse prevention planning and includes five steps; assessment, capacity, planning, implementation, and evaluation.

TIMELINE FOR CMHPSM RFQ

RFQ to Oversight Policy Board for Review	June 27, 2019
RFQ Released	July 1, 2019
Bid Submission Deadline	August 1, 2019
Reviews Begin	August 2, 2019
Award Recommendations to Oversight Policy Board	August 22, 2019
Contracts/Awards to CMHPSM Regional Board	September 11, 2019
Award Notifications	September 16, 2019
Contracts Issued to Awarded Organizations	Prior to October 1, 2019

■ LENAWEE COUNTY – PREVENTION CHANGES

The CMHPSM has received notice that the Lenawee Community Mental Health Authority has decided to let the SUD prevention service contract expire at the end of this fiscal year. The CMHPSM Prevention Team will review the effectiveness of currently funded evidence-based interventions (Community Trials Intervention, Student Prevention Leadership Teams, and Do Your Part – Alcohol). Based on this review, we will consult with other potential Lenawee County providers regarding the ability to continue with programming efforts in Lenawee County.

■ REGIONAL – PREVENTION SERVICES FOR EMERGING NEEDS

Over the last two years regional SUD Treatment and Prevention agencies, workgroups, and coalitions, have received numerous requests from school districts within the region for presentations on SUD-related topics (effective prevention strategies, addiction, treatment resources, effective treatment methods, medication assisted treatment, recovery stories, etc.). Various providers and local experts have stepped up to respond to these requests in addition to their regular work duties. Given the breadth of topics requested by the schools for presenters to cover, the presentations typically require extra coordination and planning by presenters to respond to diverse requests. In an effort to ensure school requests can be accommodated and presented with helpful, quality information, we would like to propose the development of a PA2 mini grant with funds made specifically available for a regional speakers' bureau. If the concept is approved by OPB, SUD staff will proceed to develop a specific mini grant application that will include

Prevention

presentation criteria requirements and will work with the OPB to determine an acceptable reimbursement rate for applicants.

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN

Serving Lenawee, Livingston, Monroe, and Washtenaw Counties



<i>Request for MINI GRANT Funds</i>	
<i>Mini-Grants: A specific amount of funds per county set aside annually for small initiatives that arise during the fiscal year in the amount not to exceed \$1000. There is a limit of \$5000 per county each fiscal year. Mini-Grants may only be awarded for special activities or initiatives related to substance use disorders education, awareness, community activities and events, etc., and not be used for staffing purposes. The applicant must identify a source of other matching funds or in-kind effort to receive the grant. Once an award is made, the applicant will not be eligible to receive other mini-grant funding for any additional project during the fiscal year.</i>	
Date:	5/2/2019
Contact Person: (Name, email, phone)	Matthew Hill mhill@homeofnewvision.org / 810-333-3890
Requestor:	Washtenaw Recovery Advocacy Project / Home of New Vision
Amount of Request:	\$1,000
Type of Request:	<input checked="" type="checkbox"/> Community event <input type="checkbox"/> Other: _____ <input type="checkbox"/> Staff Training <input type="checkbox"/> Coalition Support Attach information as needed.
Describe Program Request:	5 th Annual Recovery Walk for Awareness. Campaign designed to show the Washtenaw County community that people can, and do, recover from SUD. This is an effort to fight negative stigma associated with SUD.
Targeted Community:	(Geographic area) Washtenaw, Livingston, Lenawee, and Monroe Counties
Describe how and where matching funds will be applied. If in-kind, describe:	Matching funds are being used to rent park space, provide portable restrooms for the event, marketing / advertising, and an anti-stigma campaign.
Identify Key People, Coalitions, and/or Community Partners involved in program:	Main Community Partners will be Washtenaw Recovery Advocacy Project (Matt Hill – Program Manager), Home of New Vision (Glynis Anderson – CEO), community peer recovery coaches.
<i>Please note:</i> All programming must be consistent with the implementation of Recovery-Oriented Systems of Care (ROSC). Recovery-oriented systems support person-centered and self-directed approaches to care that build on the strengths and resilience of individuals, families, and communities to take responsibility for their sustained health, wellness and recovery from alcohol and drug problems (Center for Substance Abuse Treatment, 2005).	
<i>CMHPSM Office Use Only</i>	
Amount Recommended & Comments:	Click or tap here to enter text.

FY 2018/19 CMHPSM SUD MINI-GRANT REQUEST/REPORT

Funding reserved per county \$5000

DATE	PROVIDER	AMOUNT REQUESTED	PROGRAM DESCRIPTION	COUNTY	COUNTY BALANCE REMAINING
10-25-18	Monroe Prevention Coalition	\$1,000	Youth Summit	Monroe	\$4,000
3-2019	Dawn Farm	\$1,000	Older Adult	Washtenaw	\$4,000
4-2019	Washtenaw Health Plan	\$1,000	Harm Reduction Conference	Washtenaw	\$3,000
4-2019	CCSEM	\$1,000	SPLT Teams-Sports Impact Luncheon	Monroe	\$3,000
5-2019	HNV – WRAP	\$1,000	5 TH Annual Recovery Walk	Washtenaw	\$2,000

CMHPSM SUD OVERSIGHT POLICY BOARD

ACTION REQUEST

Board Meeting Date: May 23, 2019

Action Requested: Consideration to use PA2 FUNDS to reimburse trainers and clinicians at regional providers for time spent in training on the mandated Global Assessment of Individual Need (GAIN).

Background: The state of Michigan in their pursuit of the 1115 Waiver through Federal Center for Medicaid/Medicare Services Administration (CMS) and federal parity mandates, has selected the GAIN I-CORE assessment tool from Chestnut Health Services to implement in Michigan. This tool will be required to be used by every provider in determining and verifying level of care placement for our clients. The tool is extremely comprehensive. The mandate is to have all master's prepared clinicians' complete assessments on clients using the tool and the Chestnut system that houses the records. The training is quite extensive with clinicians needing to be trained, then supervised completing the tool on paper and under recorded observance by their trainer. The trainers must complete their own administrator training, then go thru a certification process with Chestnut being observed giving supervision trainee's while they are learning the tool. The time it takes to administer the tool is approximately 2 hours per client. The supervision time can be as much as 10 hours per staff member. The state covers the cost of the training for the trainer and staff member. However, it does not cover the cost of the supervision time that is given by the local trainer at their agency and the time it takes for supervision by both the trainer and staff member.

There has been much discussion about the problem at the state. They will reimburse a trainer at \$800 for a full training session, but only if that trainer is not training their own staff! Also, when staff are taken offline, there is no mechanism to cover the loss in revenue by the provider.

Some of the PIHPs have decided to use PA2 funds to reimburse providers for the gap. Region 5 – Mid State Health Network created a billing form to use for this purpose. Included in your packet as Attachment #5a. This is only for you get an idea of what it takes for a clinician to be trained in Michigan

Proposal:

1. Recommend allocating PA2 FUNDS for provider staff trainers subsequent to a maximum \$650.00 reimbursement rate per trainee up to 10 hours, payable once certification is achieved.
2. Reimburse Trainer at \$1,500 for becoming certified trainer through Chestnut. The region has two fully trained trainers and 4 pending trainer training.
3. Reimburse Trainer for conducting training and supervision at \$125/hour/staff maximum 10 hours per staff member

Based upon a survey of providers, we currently have 35 clinicians who need training and certification by 10-01-20. The anticipated cost for this would be \$22,750 for clinicians, and \$9,000 for training trainers; and approximately \$22,000 for supervision costs.

Attachment #

NOTE: we will seek funding from the state to offset these costs, but currently have questionable indication that they will reimburse.

Connection to PIHP/MDCH Contract, Regional Strategic Plan or Shared Governance Model:

Meet State mandate

Recommendation:

Allow funds to be set aside for GAIN training reimbursement/incentives.

